
NEWSLETTER

Volume 1 Issue 8

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KEY ISSUES:

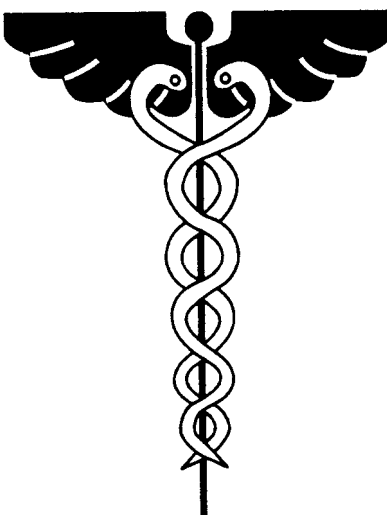
WHAT EVERY PHYSICIAN NEEDS TO KNOW ABOUT PUBLIC INFORMATION:

The Board of Medicine is a state agency, whose mission is to protect the citizens of the state from the unlawful, unethical or impaired practice of medicine. As a state agency, the Board is bound by RSA 911-A, New Hampshire's "Right to Know" law. That law specifies that governmental agencies must ensure the "greatest possible public access to their actions, discussion and records. . ."

The Board receives many questions about what information about physicians is public. The following is a brief summary of the key aspects of the Board's public information policy.

- Unless the Medical Practice Act specifically deems that information as confidential, then it is public.
- All applications, hearings, disciplinary actions and petitions to the board are public.
- Any information gathered in the course of a disciplinary investigation is not available to the public, unless and until the

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ABOUT THE BOARD

Board Members:

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Jean Barnes	Concord
James Sise, MD	Keene
Kevin Costin, PA-C	Manchester

RECENT CHANGES TO THE BOARD...

On February 18, 1998, the Board welcomed Mr. Kevin R. Costin, a physician assistant from Manchester who was appointed by Governor Shaheen seat vacated by

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RECENT CHANGES

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Maureen **Knepp** in September.

Mr. **Costin** has practiced in New Hampshire for 24 years, for most of that time in a family practice in Manchester. He formerly served as a member of the Physician Assistant Advisory Committee of the Board and has been active in the national and state association for physician assistants.

The Board also appointed Ms. Diane Denney Drew, PA-C, of Washington, NH, to the Physician Assistant Advisory Committee to replace Mr. **Costin**. Ms. Drew has practiced as a physician assistant in New Hampshire for 23 years, primarily in family practice.



DISCIPLINARY ACTION

The following **final** disciplinary actions were taken by the Board from February 1, 1998 through August 1, 1998.

Robert A. Fox, M.D. - **2/13/98**
License approved with conditions which included the physician's agreement to be monitored by the physician health program for 2 years upon relocation to New Hampshire.

Patrick W. Lanzetta, MD - **2/11/98**
Entered into a settlement based on allegations of theft of a controlled substance. License suspended for 7 days, stayed on the condition that a \$1,000 fine be paid within 30 days.

Ronald **Witkin**, M.D. - **2/11/98**

Entered into a settlement to accept a reprimand based on allegations of substandard care in the treatment of one patient.

Henry D. **Astarjian**, M.D. - **4/8/98**

Entered into a settlement based on allegations that he engaged in unprofessional conduct by kissing a patient. License suspended for 18 months, all but 14 days stayed and ordered to complete a one week course in professional ethics and 20 hours of education in professional boundaries.

Thomas L. Meyer, M.D. - **4/8/98**

Restrictions placed on license based on unprofessional conduct which included failure to observe professional boundaries in his treatment of 2 patients. License restricted to require that another psychiatrist monitor his treatment of all female patients.

Laxmikant K. **Rathi**, M.D. -

5/18/98

Voluntary surrender of license for criminal conviction for **medicaid** fraud.

L. **Andre Perron**, M.D. - **6/8/98**

Emergency suspension of license based on allegations of practice while under the influence of alcohol. Hearing scheduled for **8/17/98**.

Bradley N. Libenson, D.O. -

6/10/98

Entered into a settlement agreement for reciprocal disciplinary action based on action taken in Oregon in 1992. License granted with restriction to include the use of a chaperone when treating any female patient.

NEWSLETTER

LEGISLATIVE UPDATE

While education was the top focus of the general court this year, there were several bills passed which should have a great deal of impact on the practices of the Board in the future.

Of primary interest to the Board were two bills, **HB 1262** and **SB 501**, which permit the board to add a part time physician to it's staff and to receive the full time services of an attorney in the attorney general's **office** to act as hearing counsel. The physician will serve as the administrator of the Medical Review Subcommittee, the Board's investigative committee. Both of these bills will act to bring the Board's resources more in line with the responsibility it faces in protecting the public. It is hoped that with the addition of these new positions, the Board will become more efficient in handling complaints and more pro-active in it's investigations. The Board extends its sincere thanks to Representative James Pilliod and Senator Beverly Hollingsworth, the prime sponsors of these bills.

HB 1457, which adds physician assistants to the list of practitioners who can receive and dispense controlled drugs was passed. This bill was requested by the Board and was most kindly sponsored by Representative Ben Baroody.

SB 385, also sponsored by Senator Hollingsworth, was passed. This bill requires that all superior courts in New Hampshire report to the board when any physician is convicted of a felony.

SB 383 established a committee to study the use of telemedicine in New Hampshire. As a result of the passage of this bill, and the public Continued on page 3.. .

LOOKING BACK: FROM THE PAGES OF OUR HISTORY

During a recent office renovation, several members of the board's staff came upon a very old book, faded, with frayed edges, but still looking very official. It proved to be the first licensure log book ever to have been kept in New Hampshire. The first entry was dated August 31, 1897.

On that date, medical license #1, was issued to Henry Clay Ball of Concord. The fee for that license was \$1 .00. Actually, on that same date, 672 licenses were issued, presumably to every doctor presently in the state on March 16, 1897, the date that the new law granting licensure was enacted.

During those early years, physicians were granted licenses in one of three ways; by grandfathering, by examination given by the board, or by endorsement of their Dartmouth College Diploma. In that first group of licensees 25 were considered "eclectic", 40 were "homeopathic" and the rest were considered "regular".

Wilfred Ernest Burpee, of Manchester, was the **first** to have his license revoked. The revocation, on January 13, 1898, was apparently based on a revised evaluation of his credentials which showed him to be an "oculist" rather than a medical doctor.

A note in the book indicates that in 1898, a discussion arose regarding whether it would ever be appropriate to license women as physicians. That question was apparently not settled until 1907, when Mary Agnes Sweeney was granted license # 1108.

The licensure log was used continuously as the Board's official record book until **1973**.

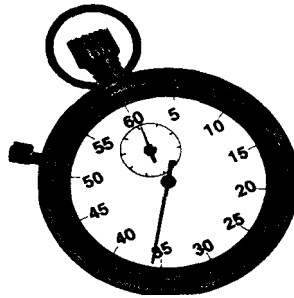
LEGISLATIVE UPDATE

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hearing held by the Board on April 1, 1998, the Board has decided to table any consideration of rules changes regarding telemedicine licensure until this study committee completes its work. The Board fully supports additional study into this area.

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- investigation results in a notice of public hearing.
- **Letters of concern are not public information.**
- **The meetings of the Medical Review Subcommittee are confidential.**
- Letters of complaint are not available to the public.
- Lawsuits are, in themselves, public documents, but any board investigation into the suit is confidential unless and until it results in a notice of public hearing.



URGENT! NOTICE TO ALL PHYSICIANS

License renewal was due on June 30, 1998. If you have not renewed your license, you should contact the Board immediately at 271-6934.

Late renewal will be available until September 30, 1998 with payment of an additional \$100 late fee.

NEWSLETTER

NEW RULES PROPOSED

- PHYSICIAN HEALTH PROGRAM
- MEDICAL RECORDS
- PRESCRIBING FOR CHRONIC PAIN

On October 7, 1998, the Board will hold a hearing to receive public comment on rules proposals which have been submitted to the Joint Legislative Committee on Administrative Rules.

These new rules involve three separate subjects. **The first** proposal sets up parameters to be met by any program which seeks recognition by the Board as a monitoring program for physicians with substance abuse disorders.

The second proposal sets the ethical standards for creating, maintaining and providing access to patient medical records. The Board receives numerous complaints each month regarding medical records and **firmly** believes that rules are necessary in this area.

The third proposal sets ethical standards for the prescribing of controlled substances for patients with chronic non-malignant pain. The rules mirror the recommended standards of the Federation of State Medical Boards and are in line with the recommendations of the NH Medical Society.

All physicians, physician assistants, or any other interested party is invited to attend the hearing, which is open to the public. **The hearing will be held on October 7, 1998 at the offices of the Board at 2 Industrial Park Dr., Concord, NH at 10:30 AM.** Copies of the rules proposal are available to licensees free of charge by calling 271-1205.